PIN CODE REQUEST FORM FOR RADIUS SUBMITTAL

This form is also available from the Department's website, www.state.nj.us/dep/aqpp/, under "Applying for an Air Permit." You only need to have completed this form once. If you do not wish to certify the information electronically, you do not need to do so. You may submit a paper certification form along with your diskette and you do not need to complete and send this form at all.

Please do not send this form along with your Emission Statement submittal. This form should be completed prior to the Emission Statement submittal so that you will have the PIN Codes for certification of the Emission Statement. If you have not done so already, you should return this form after completion to:

NJDEP – Air Quality Regulations P.O. Box 027 Trenton, NJ 08625 Attn: New Facility Group

Or the completed form may be faxed and be processed that same day. The fax number is (609) 633-8236.

AIMS-099

PIN CODE ASSIGNMENT FOR RADIUS SUBMITTAL

(Please Print)

Facility ID:	
Facility Name:	
Street Address:	
Address Line 2:	
City:	
Phone:	
	Name of Person Requesting PIN CODE:
Name of Person Requesting PIN CODE:	Title: Phone:
Title: Phone:	Pin Code Selected (Limited to 7 alpha/numeric characters)
Pin Code Selected (Limited to 7 alpha/numeric characters)	Is this Individual a Responsible Official? (Please check one) Yes No
Is this Individual a Responsible Official? (Please check one) Yes No	is this fluividual a Responsible Official: (Flease check one)
Name of Person Requesting PIN CODE:	Name of Person Requesting PIN CODE:
Γitle: Phone:	Title: Phone:
Pin Code Selected (Limited to 7 alpha/numeric characters)	Pin Code Selected (Limited to 7 alpha/numeric characters)
Is this Individual a Responsible Official? (Please check one)	Is this Individual a Responsible Official? (Please check one)
Therefore, it is recommended that you keep a copy of this form for your records. Thi assigned. Please note that identical Pin Codes can not be assigned for different person	stem. A new request must be submitted if a Pin is forgotten or needs to be changed is request must have at least one Responsible Official listed before any Pin Code will be nnel under the same facility ID. A signature from a Responsible Official is required for sible Official unless a letter accompanies this request (on company letterhead) from a
certify under penalty of law that the submitted information is true, accurate and complete. I am aware that there m	may be significant civil penalties imposed, including the possibility of fine, imprisonment or both, for submitting false,
naccurate or incomplete information.	
Responsible Official Name (Please Print) Signature	ure Date

FOR DEP USE ONLY

Date PIN(s) Assigned:

Assigned by: _____

Revised 03/30/05